

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ABSORBENT SHEET PRODUCTS DISPENSER HAVING INTERCHANGEABLE FACE PLATES
Attorney Docket Number::	1517-1033
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES OF AMERICA
Status:: Full Capacity
Given Name:: ROBERT
Middle Name:: C.
Family Name:: HOCHTRITT
City of Residence:: NEENAH
State or Province of Residence:: WISCONSIN
Country of Residence:: UNITED STATES OF AMERICA
Street of Mailing Address:: 1867 EAGLE DRIVE
City of Mailing Address:: NEENAH
State or Province of Mailing Address:: WISCONSIN
Country of Mailing Address:: UNITED STATES OF AMERICA
Postal or Zip Code of Mailing Address:: 54956

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED STATES OF AMERICA
Status:: Full Capacity
Given Name:: ANDREW
Middle Name:: M.
Family Name:: CONGER
City of Residence:: NEENAH
State or Province of Residence:: WISCONSIN
Country of Residence:: UNITED STATES OF AMERICA
Street of Mailing Address:: 2975 FAIRWINDS DRIVE
City of Mailing Address:: NEENAH
State or Province of Mailing Address:: WISCONSIN
Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Code of Mailing Address:: 54956

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::